

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000024167

Entity Name: STONE CREEK SENIOR HEALTH, LLC

Current Principal Place of Business:

7485 SW 97TH TERRACE RD
OCALA, FL 34481

Current Mailing Address:

7485 SW 97TH TERRACE RD
OCALA, FL 34481 US

FEI Number: 27-5234512

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAKER, LESLIE
7380 SW 60TH AVE., SUITE 1
OCALA, FL 34476 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MEMBER
Name	SCHROADER, DARRY	Name	SCHROADER, DARA
Address	7485 SW 97TH TERRACE RD	Address	2507 BAYFIELD CT.
City-State-Zip:	OCALA FL 34481	City-State-Zip:	HOLIDAY FL 34691

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DARRY SCHROADER

MGR

03/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date